PTO/SB/01 (12-97)

Approved for use through 9/30/00. OMB 0651-0032

Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

	Attorney Docket Nun	nber 1497.020				
DECLARATION FOR UTILITY OR	First Named Invento	r Jeffrey Held				
DESIGN PATENT APPLICATION	COMPLETE IF KNOWN					
(37 CFR 1.63)	Application Number	10 / 270,420				
(6. 5	Filing Date	10/15/2002				
☐ Declaration ☐ Declaration ☐ Declaration ☐ Submitted ☐ OR ☐ Submitted after Initial	Group Art Unit	1724				
with Initial Filing (surcharge (37 CFR 1.16 (e)) required)	Examiner Name					

As a below named invento	or, I hereby declare that:								
My residence, post office address, and citizenship are as stated below next to my name.									
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:									
Method for Treating Waste-Activated Sludge									
Using Electroporation									
the specification of which (Title of the Invention)									
. is attached hereto									
was filed on (MM/DD	10/15/20	002 as United	States Applicat	ion Number or PCT International					
Application Number 10/	270,420 and wa	is amended on (MM/DD/Y)	m	(if applicable).					
I hereby state that I have rev	viewed and understand the d	contents of the above identi	ified specification	n, including the claims, as					
amended by any amendmen			defined in 27 CE	D 1 56					
I acknowledge the duty to di	sclose information which is i	natenal to patentiability as t	Delined at 37 CF	K 1.50.					
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.									
Prior Foreign Application		Foreign Filing Date	Priority Not Claimed	Certified Copy Attached?					
Number(s)	Country	(MM/DD/YYYY)	Not Claimed	YES NO					
Ì									
1									
	•								
Additional famion applica	ition numbers are listed on a	supplemental priority data	sheet PTO/SB/	02B attached hereto:					
Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:  I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.									
Application Number		e (MM/DD/YYYY)							
			numb suppl	onal provisional application ers are listed on a emental priority data sheet SB/02B attached hereto.					
l									

[Page 1 of 4]
Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Please type a plus sign (+) Inside this box ->	
Please type a plus sign (+) inside this box 🔫	لتا

PTO/SB/01 (12-97)

Approved for use through 9/30/00. OMB 0651-0032

Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLAR	KATION -	<u> - Uti</u>	HILY	OI L	Jesig	-	ate	16 77	<u>. P.</u>	- Catio	
I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.											
U.S. Parei	nt Application or Number	PCT P	arent		Parent F			Pa		t Patent Nւ f <i>applicabl</i> e	
Number (MM/DD/TTT)											
08/552,226 11/01/1995 5,695,650											
	Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.										
Additional U.S. or Po	CT international applica	tion num	bers are	listed on a	to oppose	tal pi	e application	and to tra	nsact	all business in	the Patent
As a named inventor, I he and Trademark Office cor	nnected therewith:	Custome OR	er Numb	per [				<b>→</b>		Place Custon Number Bar C	ner Gode
		Register	red prac Registr		name/registr	ation				Regist	
Name	<u> </u>	ļ	Num				Name	3		Num	ber
Additional registered	practitioner(s) named o	on supple	mental	Registered	Practitioner	Info	rmation she	et PTO/SB	/02C	attached heret	0.
Direct all corresponde	ence to: 🔀 Custon	ner Num Code La	nber	275			OR			ndence addre	
Name											
Address				•							-
Address											
City				.,	State	<u> </u>		ZIP			
Country		Te	lephon	18				Fax			
I hereby declare that al believed to be true; and punishable by fine or in application or any paten	d further that these sta nprisonment, or both, t										
Name of Sole or F	irst Inventor:				☐ A pet	ition	has been	filed for t	his u	nsigned inve	ntor
Given Nar	me (first and middle (	if anvil					Famil	v Name o	r Sur	name	
OWGITTION	110 (1110)										
Inventor's Signature										Date	
Residence: City			State		Count	у				Citizenship	· · · · · · · · · · · · · · · · · · ·
Post Office Address											
Post Office Address		<del></del>									
City	State			ZIF	, [			Count	ry		
Oly Additional investor	- state					al Ir	nventor(e)			SB/02A attac	hed here

Please type a plus sign (+) inside this box ->

Approved for use through 9/30/00. OMB 0651-0032

Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

## Utility or Design Patent Application **DECLARATION-**

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the actional or PCT international filing date of this application. and the national or PCT international filing date of this application. **Parent Patent Number Parent Filing Date U.S. Parent Application or PCT Parent** (if applicable) (MM/DD/YYYY) Number 03/26/2002 10/107,614 09/612,776 6,395,176 07/10/2000 12/21/1999 01/13/1999 09/468,427 6,030,538 09/229,279 08/934,548 US/934.548

Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet P70/98/02B attached hereto. As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Pater Place Customer and Trademark Office connected therewith: 

Customer Number Number Bar Code Lahel here Registered practitioner(s) name/registration number listed below Registration Registration Number Number Name 27,891 Milton S. Gerstein Adam Sacharoff 43,075 26,705 Marvin N. Benn 098 Stephen J. Cassen Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto. OR T:1 Correspondence address below **Customer Number** Direct all correspondence to: 💭 27555 or Bar Code Label Name Address Address State ZIP City Telephone Country I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. A petition has been filed for this unsigned inventor Name of Sole or First Inventor: Family Name or Surname Given Name (first and middle [if any]) Held Jeffrey **/02** Inventor's Signature IL USA Chicago Citizenship Country Residence: City 431 West Oakdale Avenue **Post Office Address Post Office Address** USA 60657 Chicago IL Country City supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto

Additional inventors are being named on the

Please	type	a	plus	sign	(+)	Inside this box	<b>→</b>	+
--------	------	---	------	------	-----	-----------------	----------	---

PTO/SE/02A (11-00)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

## **DECLARATION**

ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page \_\_\_\_ of \_\_\_

Name of Additional Joint Inventor, if any	A petition has b	A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any])			Family Name or Surname					
Satya P.	Chauhan							
inventor's Signature Date 12/17								
Residence: City Columbus State OH Country USA Citizenship US								
Mailing Address 1073 Bluffpo	oint D	rive	<u> </u>			·		
Mailing Address			T					
City Colmbus	State	ОН	ZIP 43535	Cou	ntry USA			
Name of Additional Joint Inventor, if any	/:		A petition has be	een filed for	this unsigned inver	ntor		
Given Name (first and middle [if any])			Far	nily Name o	Sumame			
Inventor's Signature					Date			
Residence: City	State		Country Citizenship					
				1				
Malling Address								
Mailing Address								
City	State	ZIP Country						
Name of Additional Joint Inventor, if a	ny:		A petition has b	een filed for	this unsigned inve	ntor		
Given Name (first and middle [if any]	)			Family Na	me or Surname			
Inventor's					Date			
Signature	T		1		Date			
Residence: City	State		Country		Citizenshir	<u> </u>		
Mailing Address	<del> </del>							
Mailing Address			<del>-                                    </del>		1			
City State ZIP Country								

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.